

Docket No: 475.020

**APPLICATION FOR UNITED STATES LETTERS PATENT  
DECLARATION, POWER OF ATTORNEY, AND PETITION**

As a below-named inventor, I declare that:

My residence, post office address and citizenship are as stated next to my name; I believe that I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural inventors are named below) of the invention which is described and which is claimed in the specification, entitled:

Device for nitriding by ionic implantation of an aluminium alloy part, and corresponding method

The specification ☒ is attached hereto ☐ was filed on \_\_\_\_\_, as Application Serial No. \_\_\_\_\_.

I hereby state that I have reviewed and understand the contents of said specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to the patentability of this application in accordance with Title 37, Code of Federal Regulations, §1.56(a).

I hereby claim foreign priority benefits under Title 35, United States Code, §119 of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed.<sup>1</sup>

COUNTRY	APPLICATION NUMBER	DATE (Day, Month, Year)	PRIORITY CLAIMED UNDER 35 U.S.C. 119
France	0401047	04 02 2004	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
France	0401749	21 02 2004	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
France	0500963	31 01 2005	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
France	PCT/FR2005/000224	02 02 2005	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>

I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application:

<sup>1</sup>In Non-Convention cases, a listing of all filings and current status of cases filed more than a year before the U.S. filing is required to comply with 37 CFR 1.56(a). Such a listing may be attached.

APPLICATION SERIAL NO.	FILING DATE	STATUS

I hereby appoint my attorneys with full power of substitution and revocation, to prosecute this application and to transact all business in the U.S. Patent & Trademark Office connected therewith:  
 James V. Costigan, Reg. No. 25,669; Kenneth F. Florek, Reg. No. 33,173;  
 Alan B. Clement, Reg. No. 34,563; Martin P. Endres, Reg. No. 35,498;  
 Kathleen A. Costigan, Reg. No. 56,006; Nicholas P. Chiara, Reg. No. 52,737 Customer Number: 47888; Charles A. Muserlian, Reg. No. 19,683

CORRESPONDENCE AND CALLS TO: Charles A. Muserlian  
 HEDMAN & COSTIGAN, P.C.  
 1185 Avenue of the Americas  
 New York, NY 10036-2601  
 Telephone: (212) 302-8989

The undersigned declares further that all statements made herein of his own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

INVENTOR (S)	DATE	RESIDENCE AND P.O. ADDRESS
Name: GUERNALEC, Frederic Signature:	Date: Citizen of: France	Launey F-35340 Litre France
Name: BUSARDO, Denis Signature:	Date: Citizen of: France	Chemin du Four F-14510 Gonneville/Mer France
Name: Signature:	Date: Citizen of:	
Name: Signature:	Date: Citizen of:	